

**CLAIMS ONLY**

SERIAL NO. \_\_\_\_\_ / FILING DATE \_\_\_\_\_

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
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48						
49						
50						
TOTAL IND.	8					
TOTAL DEP.	35					
TOTAL CLAIMS	33					

 TOTAL IND.    8        TOTAL DEP.    35        TOTAL CLAIMS    33    

 TOTAL IND.        TOTAL DEP.        TOTAL CLAIMS    

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

**Best Available Copy**